

J1040 U.S. PTO.
09/955471

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 20 | 9/27 |
| FORMALITY REVIEW | H.T. | 1117 | 10/23/01 |
| RESPONSE FORMALITY REVIEW | H.C. | 712 | 03-12-02 |

BEST AVAILABLE COPY

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral)... Canceled A Appeal
÷ Restricted O Objected

| Claim | Date |
|----------|---------|
| Final | |
| Original | |
| 1 | 4/26/03 |
| 2 | 9/5/03 |
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| Claim | Date |
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| Claim | Date |
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| Final | |
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If more than 150 claims or 10 actions
staple additional sheet here

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553 N2 10/23/01
ASP (unc) 3/13/02